## PART B - FEE(S) TRANSMITTAL

AUG 2 2 2007						Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885						
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APPLICATION NO. FILING DATE			FIRST NAMED INVEN			NTOR ATTORNEY DOCKET				NO. CONFIRMATION NO.		
L		1.				RA9-				7234		
09/261,030	03/02/1999		Christopher Jo	Del Nack			072/	1230RC	CE	1234		
TITLE OF INVENTION METHOD AND SY	N: YSTEM FOR MAN	AGIN	G A CONSUI	MER TRANSAC	тю	N SYSTEM W	ITH A	4 МОВ	ILE MAN	IAGEM	ENT DEVICE	
APPLN. TYPE	SMALL ENTITY	188	UE PEE DUE	PUBLICATION FEB	DUE	PREV. PAID ISSUI	B FBB	TOTA	L FEE(S) DU	3	DATE DUE	
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	EXAMINER		ART UNIT CLASS-SUBCLA			7						
CUFF, MICHAEL A 3627			705-021000			_						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
(A) NAME OF ASSI	less an assignee is iden th in 37 CFR 3.11. Comp GNEE AL BUSINESS MA	tified be pletion of CHIN	llow, no assigned f this form is NO ES	data will appear of I a substitute for fili (B) RESIDENCE: ARMONK, N	n the ng an (CIT EW	patent. If an assign assignment. Y and STATE OR ( YORK	COUN	TRY)				
		r catego	ries (Will not be p	rinted on the patent)	· _				noid issue fi	e shown	ahave)	
4a. The following fee(s)  Issue Fee Publication Fee Advance Order	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0563 (enclose an extra COPY of this form											
a. Applicant clai	atus (from status indicat ms SMALL ENTITY st nd Publication Fee (if re records of the United S	ntus. See nuired) v	37 CFR 1.27.	ed from anyone othe	s no l		istered	attorney	or agent; or	the assign	ee or other party in	
	/Joseph A. Saw					08/22/206 Date June	1487E	100F2	00000037	988263	09261030 	
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This collection of informan application. Confide submitting the complet this form and/or suggest Box 1450, Alexandria,	mation is required by 37 initiality is governed by 3 cd application form to to stions for reducing this to Virginia 22313-1450. I	CFR 1.3 5 U.S.C he USPT ourden, s OO NOT	11. The informa 1. 122 and 37 CF TO. Time will va hould be sent to SEND FEES OF	ry depending upon the Chief Information COMPLETED FO	he ind n Off RMS	or retain a benefit by estimated to take 17 dividual case. Any icer, U.S. Patent an TO THIS ADDRE	the put minut comme d Trade SS. SE	iblic whi tes to con ents on the emark O ND TO:	ch is to file ( nplete, inclu ne amount of ffice, U.S. D Commission	time you epartmenter for Pat	require to complet t of Commerce, P.C ents, P.O. Box 1450	
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